## 2010 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F05000007190

Feb 15, 2010 Secretary of State

Entity Name: PROFESSIONAL MEDICAL INSURANCE SERVICES, INC.

Current Principal Place of Business: New Principal Place of Business:

16800 GREENSPOINT PARK DRIVE, SUITE 255N

HOUSTON, TX 77060

Current Mailing Address: New Mailing Address:

16800 GREENSPOINT PARK DRIVE, SUITE 255N HOUSTON, TX  $\,77060$ 

FEI Number: 76-0585181 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SOUKUP, HOPE 210 SOUTH PINELLAS AVENUE, SUITE 158 TARPON SPRINGS, FL 34689 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title: CPS1

Name: REESE, WILLIAM J JR.

Address: 16800 GREENSPOINT PARK DRIVE, SUITE 255N

City-St-Zip: HOUSTON, TX 77060

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: WILLIAM J. REESE, JR. CPST 02/15/2010